

National Stage Processing
Paralegal Specialist

(703) 305-3734

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09762547

APPLICANT(S)

CLAIMS

CLAIM	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
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TOTAL IND.	3					
TOTAL DEP.	17	↓	↓	↓	↓	↓
TOTAL CLAIMS	20	████████	████████	████████	████████	████████

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